Fill in this information to identify your	case:
United States Bankruptcy Court for the: Northern District of Ohio	
Case number (If known):	Chapter you are filing under:  Chapter 7  Chapter 11  Chapter 12  Chapter 13



# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on you	<sup>ır</sup> Desiree	
	government-issued picture identification (for example,	First name	First name
	your driver's license or	Dorothy-Ann Middle name	Middle name
	passport).	Young	wildgie name
	Bring your picture identification to your meeting with the trustee.		Last name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
1122			
3.	Only the last 4 digits of		
	your Social Security	xxx - xx - 9 4 9 6	xxx - xx
	number or federal Individual Taxpayer	OR	OR OR
	Identification number (ITIN)	9 xx - xx	9 xx - xx

	-
dle Name	

	namen alleman kalinen kalinen kalinen kalin kali					
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers		☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.			
	(EIN) you have used in the last 8 years	Business name	Business name			
	Include trade names and doing business as names	Business name	Business name			
		EIN	<u>en — — — — — — — — — — — — — — — — — — —</u>			
		EIN	EN			
5.	Where you live		If Debtor 2 lives at a different address:			
		3745 Mayfield Rd				
		Number Street	Number Street			
		Apt. 207B				
		Cleveland OH 44121				
		City State ZIP Code	City State ZIP Code			
		Cuyahoga County	County			
-		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number Street	Number Street			
		P.O. Box	P.O. Box			
		City State ZIP Code	City State ZIP Code			
6.	Why you are choosing	Check one:	Check one:			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)			
Wellington						

## Part 2:

## **Tell the Court About Your Bankruptcy Case**

7.	The chapter of the Bankruptcy Code you are choosing to file under		uptcy (F oter 7 oter 11 oter 12	a brief description of each, see <i>Notice</i> Form 2010)). Also, go to the top of pag		
8.	How you will pay the fee	local yours subn with  I nee Appl  Preq By la less pay t	court for self, you nitting you a pre-production in the self. The self court is the self court in the	dge may, but is not required to, was 50% of the official poverty line that	eck, or money attorney may part choose this option in the control of the control	y, if you are paying the fee order. If your attorney is pay with a credit card or check tion, sign and attach the ints (Official Form 103A).  Ion only if you are filing for Chapter 7. and may do so only if your income is r family size and you are unable to just fill out the Application to Have the
9.	Have you filed for bankruptcy within the last 8 years?	☑ No ☐ Yes.	District	When When	MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY	Case number  Case number  Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☑ No ☐ Yes.	District Debtor	When	MM/DD/YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11.	Do you rent your residence?	□ No. ☑ Yes.	☑ No.	our landlord obtained an eviction judgm . Go to line 12. s. Fill out <i>Initial Statement About an E</i> rt of this bankruptcy petition.		Against You (Form 101A) and file it as

Case number	(if known)		

#### Part 3:

## Report About Any Businesses You Own as a Sole Proprietor

	y full- or part-time ness?
busine individ separ	proprietorship is a ess you operate as an lual, and is not a ate legal entity such as loration, partnership, or
sole p	have more than one roprietorship, use a ate sheet and attach it

to this petition.

12. Are you a sole proprietor

No. Go to Part 4.	
es. Name and location of business	}
Name of business, if any	
Number Street	
City	State ZIP Code
Check the appropriate box to d	describe your business:
☐ Health Care Business (as d	defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (a	as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in	11 U.S.C. § 101(53A))
☐ Commodity Broker (as define	ined in 11 U.S.C. § 101(6))
☐ None of the above	

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a *small business debtor* or a debtor as defined by 11 U.S. C. § 1182(1)?

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

- No. I am not filing under Chapter 11.
- ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
- Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.
- Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Desiree	Dorothy Ann	Young	Case number (if known)
Circl Marrie	Litable Mana	1 and blown	

<ul> <li>Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to</li> </ul>	☑ No ☐ Yes.	What is the hazard?				
public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is	s needed, w	ny is it needed?		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?				

#### Part 5:

## Explain Your Efforts to Receive a Briefing About Credit Counseling

## Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

## **About Debtor 1:**

You must check one:

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
  - Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

■ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:
  - ☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:
  - ☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case number (if known)	
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Pa	rt 6: Answer These Ques	tions for Reporting Purpos	ses					
16.	What kind of debts do	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
	you have?	☐ No. Go to line 16b. ☐ Yes. Go to line 17.						
			rily business debts? Business debts anvestment or through the operation of the					
		<ul><li>☑ No. Go to line 16c.</li><li>☑ Yes. Go to line 17.</li></ul>						
		16c. State the type of debts yo	u owe that are not consumer debts or bus	iness debts.				
17.	Are you filing under Chapter 7?	☐ No. I am not filing under C	hapter 7. Go to line 18.					
D	Do you estimate that after any exempt property is	Yes. I am filing under Chap administrative expens	oter 7. Do you estimate that after any exen es are paid that funds will be available to	npt property is excluded and distribute to unsecured creditors?				
	excluded and	No						
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ Yes						
18.	How many creditors do	<b>1</b> -49	1,000-5,000	25,001-50,000				
	ou estimate that you	□ 50-99	5,001-10,000	50,001-100,000				
	owe?	☐ 100-199 ☐ 200-999	10,001-25,000	☐ More than 100,000				
19.	How much do you	<b>2</b> \$0-\$50,000	☐ \$1,000,001-\$10 million	☐ \$500,000,001-\$1 billion				
	estimate your assets to	\$50,001-\$100,000	410,000,001-\$50 million	\$1,000,000,001-\$10 billion				
	be worth?	\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$100 million \$100,000,001-\$500 million	☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion				
20.	How much do you	<b>\$0-\$50,000</b>	☐ \$1,000,001-\$10 million	\$500,000,001-\$1 billion				
	estimate your liabilities	\$50,001-\$100,000	☐ \$10,000,001-\$50 million	\$1,000,000,001-\$10 billion				
	to be?	\$100,001-\$500,000	\$50,000,001-\$100 million	☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion				
Pa	art 7: Sign Below	□ \$500,001-\$1 million	☐ \$100,000,001-\$500 million	Moie (han \$50 billion				
Fo	or you	I have examined this petition, a correct.	and I declare under penalty of perjury that	the information provided is true and				
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		If no attorney represents me a this document, I have obtained	nd I did not pay or agree to pay someone I and read the notice required by 11 U.S.C	who is not an attorney to help me fill out C. § 342(b).				
		I request relief in accordance v	with the chapter of title 117 United States 0	Code, specified in this petition.				
		I understand making a false swith a bankruptcy case can restance. S§ 152, 1341, 1518	sult in fines up to/\$250/000, or imprisonme	g money or property by fraud in connection ent for up to 20 years, or both.				
		Desiree DA Young	Istelk Jourg	(Diliting)				
		Signature of Debtor 1	\ \signatur	re of Debtor 2				
		Executed on 10/05/2021 MM / DD	1 /yyyy	d on MM / DD /YYYY				

Desiree	Dorothy	Ann Young	
First Name	Middle Name	Last Name	

Case number (if known)	
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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date	
Signature of Attorney for Debtor		MM / DD /YYYY
Printed name		
Firm name		
Number Street		
City	State	ZIP Code
Contact phone	Email addre	988

Case number (if known

First Name

Middle Name

Last Nam

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?							
☐ No ☑ Yes							
Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or impriso							
□ No ☑ Yes							
Did you pay or agree to pay someone who is not an att	torney to help you fill out your bankruptcy forms?						
☐ Yes. Name of Person	claration, and Signature (Official Form 119).						
By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read/and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.  Desiree DA Yung							
Olestina of Datas of							
Signature of Debtor 1	Signature of Debtor 2						
Date 10/05/2021 MM / DD / YYYY	Signature of Debtor 2  Date  MM / DD / YYYY						
Date 10/05/2021	Date						
Date 10/05/2021 MM / DD / YYYY	Date MM / DD / YYYY						

Official Form 101

Debtor 1	D to	D 41	Variation		
Deptor I	Desiree First Name	Dorothy Ann Middle Name	Young Last Name		
Debtor 2 Spouse, if fili	ng) First Name	Middle Name	Last Name		
Jnited State	es Bankruptcy Court for the:	Northern District of Ohio	X		
Case numbe	er			Check if th	is is:
(If known)				_ ☐ An am∈	ended filing
					lement showing postpetition chapter 1: as of the following date:
	Form 106I			MM / DI	D/ YYYY
iche	dule I: You	ır Income			12/15
vou are s	eparated and your spot	use is not filing with you, top of any additional pa	do not include information	i about your spou	ou, include information about your spou use. If more space is needed, attach a nown). Answer every question.
. Fill in yo informa	our employment ation,		Debtor 1		Debtor 2 or non-filing spouse
attach a	ave more than one job, a separate page with tion about additional ers.	Employment status	<b>☑</b> Employed ☐ Not employed		☐ Employed ☐ Not employed
	part-time, seasonal, or ployed work.		Fulfillment Appoints		
	tion may include student emaker, if it applies.	Occupation	Fulfillment Associate	1	
		Employer's name	Amazon CLE2		
		Employer's address	21500 Emery Rd Number Street		Number Street
			North Randall O		City State 7IP Code
		How long employed the	City State	H 44128 ZIP Code	City State ZIP Code
	Cinc Ratella About		City State		City State ZIP Code
	Give Details Abou	t Monthly Income	City State	ZIP Code	
Estimat spouse If you or	te monthly income as o unless you are separated r your non-filing spouse h	t Monthly Income  f the date you file this for i.  ave more than one employ	city State ere?	ZIP Code	ite \$0 in the space. Include your non-filing
spouse If you or	te monthly income as o unless you are separated r your non-filing spouse h	t Monthly Income  f the date you file this for	city State ere?	ZIP Code	ite \$0 in the space. Include your non-filing
Estimat spouse If you or below. I	te monthly income as o unless you are separated r your non-filing spouse h f you need more space, a onthly gross wages, sa	t Monthly Income  f the date you file this for i.  ave more than one employ	city State ere?  rm. If you have nothing to rep ver, combine the information this form.  before all payroll	ZIP Code  oort for any line, wr	rite \$0 in the space. Include your non-filling or that person on the lines  For Debtor 2 or
Estimat spouse If you or below. I	te monthly income as o unless you are separated r your non-filing spouse h f you need more space, a onthly gross wages, sa	f Monthly Income  If the date you file this for it.  ave more than one employ attach a separate sheet to the lary, and commissions (b), calculate what the monthle	city State ere?  rm. If you have nothing to rep ver, combine the information this form.  before all payroll	ZIP Code  port for any line, wr  for all employers for  For Debtor 1	rite \$0 in the space. Include your non-filing or that person on the lines  For Debtor 2 or

Desiree

Dorothy Ann

Young

Case number (if known)

For Debtor 1 For Debtor 2 or non-filing spouse 1,105.10 Copy line 4 here..... 5. List all payroll deductions: 103.20 5a. Tax, Medicare, and Social Security deductions 5a. 5b. 0.00 5b. Mandatory contributions for retirement plans 0.00 5c. Voluntary contributions for retirement plans 0.00 5d. Required repayments of retirement fund loans 5d 17.20 5e. Insurance 0.00 5f. 5f. Domestic support obligations 0.00 5g. Union dues 5g. 5h. 180.60 5h. Other deductions. Specify: 301.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 804,10 7. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly net income. 8a. 0.00 8b. Interest and dividends 8b 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 settlement, and property settlement. 8c. 0.00 8d. 8d. Unemployment compensation 8e. Social Security 0.00 8e. 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 0.00 Specify: 8f. 0.00 8g. Pension or retirement income 8g. 0.00 8h 8h. Other monthly income. Specify: 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 0.0010. Calculate monthly income. Add line 7 + line 9. 804.10 804.10 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 11. + Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 804.10 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. ☐ Yes. Explain:

Fill in this	Information to iden Desiree	tify your case:  Dorothy Ann	Young		N 15 45-1- 1		
Debtor 2	First Name	Middle Name	Last Name		Check if this is:	entre er	
	ng) First Name	Middte Name	Łast Name		An amended in An Anna Anna Anna Anna Anna Anna Ann	-	etition chapter 13
United State	es Bankruptcy Court for	the: Northern District of Ohio				of the following	
Case numb	er		_		MM / DD / YYY	Y	
Official	Form 106J						
Sche	dule J: Y	our Expense	es				12/15
inf <mark>or</mark> matior		s possible. If two married p eeded, attach another shee lion.					
Part 1:	Describe Your	Household					
	oint case?						
	Go to line 2. Does Debtor 2 live i	n a separate household?					
	☑ No ☑ Yes. Debtor 2 mu	st file Official Form 106J-2, <i>E</i>	xpenses for S	Separate Household of	Debtor 2.		
•	nave dependents?	<ul><li>✓ No</li><li>✓ Yes. Fill out this inf</li></ul>	formation for	Dependent's relations Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent liv
Debtor 2. Do not st	ate the dependents'	each dependent			COCCULA DE REPORTADOR DE LA COMPANSA DE LA COCCULA DE LA C	MANUSERIA MANUSERIA MANUSERIA PROPERTIES MANUSERIA MANUS	☐ No ☐ Yes
names.							□ No
							Yes
							☐ No
							<b>∐</b> Yes
							☐ No ☐ Yes
							☐ No
							Yes
expense	expenses include s of people other th and your dependen						
art 2:	Estimate Your O	ngoing Monthly Expense	es				
Estimate y	our expenses as of	your bankruptcy filing date	uniess you a				
applicable		wanta aproj to mour ir tito					
-	•	non-cash government ass				Your expe	nses
	tal or home owners t for the ground or lot	hip expenses for your resid	l <b>ence.</b> Include	e first mortgage payme	ents and 4.	\$	755.00
If not in	ncluded in line 4:						
4a. Re	eal estate taxes				4a.	. \$	0.00
4b. Pr	operty, homeowner's	, or renter's insurance			4b.	. \$	0.00
4c. Ho	ome maintenance, re	pair, and upkeep expenses			4c.	. \$	0.00
4d. Ho	meowner's associati	on or condominium dues			4d.	. \$	0.00

Official Form 106J Schedule J: Your Expenses page 1 21-13380-aih Doc 1 FILED 10/05/21 ENTERED 10/05/21 14:50:16 Page 12 of 18

4d. Homeowner's association or condominium dues

Desiree Debtor 1

Young Dorothy Ann Case number (if known) First Name

				Your expens	es
5.	Additional mortgage payments for your residence, such as home equity loans	5.	10000	\$	0.00
ß	Utilities:				
Ψ.	6a. Electricity, heat, natural gas	6a.		\$	140.00
	6b. Water, sewer, garbage collection	6b.		\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		\$	80.00
	6d. Other. Specify:	6d.		\$	
7.	Food and housekeeping supplies	7.		\$	300.00
8.	Childcare and children's education costs	8.		\$	0.00
9.	Clothing, laundry, and dry cleaning	9.		\$	60.00
10.	Personal care products and services	10.		\$	60.00
11.	Medical and dental expenses	11.		\$	100.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.		\$	100.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.		\$	20.00
14.	Charitable contributions and religious donations	14.		\$	0.00
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.				
	15a. Life insurance	15a.		\$	0.00
	15b. Health insurance	15b.		\$	0.00
	15c. Vehicle insurance	15c.		\$	0.00
	15d. Other insurance. Specify:	15d.		\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.		\$	0.00
17.	Installment or lease payments:				
	17a. Car payments for Vehicle 1	17a.		\$	0.00
	17b. Car payments for Vehicle 2	17b.		\$	0.00
	17c. Other. Specify:	17c.		\$	0.00
	17d. Other. Specify:	17d.		\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		\$	0.00
19.	Other payments you make to support others who do not live with you.				
	Specify:	19.		\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incon	1e.			
	20a. Mortgages on other property	20a.		\$	0.00
	20b. Real estate taxes	20b.		\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.		\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		\$	0.00
	20e. Homeowner's association or condominium dues	20e.		\$	0.00

Debtor 1	Desiree First Name	Dorothy A	Ann Last Name	Young	(	Case number (# known)_			
 21. <b>Ot</b> h	er. Specify:				_		21.	+\$	0.00
2. Cal	culate your mon	thly expenses.							
22a	. Add lines 4 throu	ıgh 21.				22	2a.	\$	1,655.00
22b	. Copy line 22 (mo	onthly expenses for De	ebtor 2), if an	y, from Official Form	106J-2	22	2b.	\$	0.00
22c	. Add line 22a and	i 22b. The result is you	ur monthly ex	rpenses.		22	2c.	\$	1,655.00
23. <b>Calc</b>	ulate your monti	nly net income.							904 10
23a.	Copy line 12 (yo	our combined monthly	income) fron	n Schedule I.		2	3a.	\$	804.10
23b.	Copy your mont	hly expenses from line	e 22c above.			2	3b.	-\$	1,655.00
23c.	-	onthly expenses from ur monthly net income.	•	/ Income.		2	3с.	\$	-850.90
24. <b>Do v</b>	ou expect an inc	rease or decrease in	ı your exper	ses within the year	r after you fil	le this form?			
For	example, do you e	expect to finish paying increase to	for your car l	oan within the year	or do you exp	ect your			

☑ No. Yes.

Explain here:

Fill in thi	s information to	identify your case:				heck on	a hoy on	ly as directed in this form a	nd in
	nasta kaj lebe nasta n <u>a preside</u>	edicentification of decomposition and a policy of a second con-				orm 122			
Debtor 1	Desiree First Name	Dorothy Ann Middle Name	Young Last Name			1 Ther	e is no nr	resumption of abuse.	
Debtor 2 (Spouse, if fi	ling) First Name	Middle Name	Last Name		_	_	•	n to determine if a presumption	on of
		rt for the: Northern District of Ohio		<b>5-4</b>		abus	e applies	will be made under <i>Chapter</i> Calculation (Official Form 122	7
Case numi (If known)	oer							est does not apply now becau ary service but it could apply l	
						☐ Check	if this is	an amended filing	
Officia	l Form 12	2A-1							
Chap	ter 7 St	atement of Your	Curre	nt Mo	nthly	Inc	ome		04/20
Part 1	Calculate	Official Form 122A-1Supp) with t  Your Current Monthly Income I and filing status? Check one onl	<b>e</b>					<u></u>	
1		out Column A, lines 2-11. Ir spouse is filing with you. Fill ou	ut both Colu	mns A and B.	lines 2-11	1.			
	•	er spouse is NOT filing with you.				••			
1	_	e same household and are not le	_			mns A an	d B, lines	; 2-11.	
	Living sepa	arately or are legally separated. F ty of perjury that you and your spou living apart for reasons that do not	ill out Colum use are legal	nn A, lines 2-1 lly separated	1; do not under non	fill out Co	lumn B. I	By checking this box, you dec at applies or that you and you	lare r
ban Aug Fill	kruptcy case. 1 ust 31. If the amon n the result. Do r	nonthly income that you received 1 U.S.C. § 101(10A). For example, ount of your monthly income varied not include any income amount mon perty in one column only. If you ha	if you are fili during the 6 re than once	ing on Septer 3 months, add . For example	nber 15, to the income, if both s	he 6-mon ne for all pouses o	th period 3 months wn the sa	would be March 1 through and divide the total by 6. me rental property, put the	
- 1 + 5 (N. 1-3)	3 (194) (194) (194) (194) 	Maria Maria dagi Mariada na aga aga afi da a Maria antaga	tanna ma'n <del>g</del> ati	erita a <b>e</b> , factoria al legista a		Column Debtor	Α	Column B Debtor 2 or non-filing spouse	
	ı <b>r gross wages,</b> ore all payroil de	salary, tips, bonuses, overtime, a ductions).	and commis	ssions		\$ <u>1,6</u>	<u>34.5</u> 0	\$	
	nony and mainte umn B is filled in.	enance payments. Do not include	payments fro	om a spouse	if	\$	0.00	\$	
of y from and	ou or your depension an unmarried purpose roommates. Incl	ny source which are regularly pa endents, including child support. artner, members of your household ude regular contributions from a sp de payments you listed on line 3.	Include regi I, your deper	ular contributi ndents, paren	ons ts,	\$	0.00	\$	
	income from op arm	perating a business, profession,	Debtor 1	Debtor 2					
1		re all deductions)	\$	\$	•				
1	,	sary operating expenses	<b>-</b> \$	\$					
Net	monthly income	from a business, profession, or farr	m <u>\$</u> 0.0	00 \$	Copy here→	\$	0.00	\$	
		ntal and other real property re all deductions)	Debtor 1 \$	Debtor 2	-				
	•	sary operating expenses	<b>-</b> \$	\$	Copy_				
	•	from rental or other real property	\$0.0	00 \$	here	\$	0.00	\$	
7. Inte	rest, dividends,	and royalties				\$	0.00	\$	

ebtor 1	Desiree First Name	Dorothy Ann Middle Name Last Name	Young	Case numbe	f (if known)		
				Colum Debtor	7 7 755 5 5 5 5 6 6	Column B Debtor 2 or non-filing spouse	
8. Une	employment cor	npensation		\$	0.00	\$	
		ount if you contend that the ar curity Act. Instead, list it here:		•		· <del></del>	
F	or you						
F	or your spouse.		········ \$				
ben not Uni disa pay doe	nefit under the So include any com ted States Gover ability, or death o paid under chap es not exceed the	cial Security Act. Also, except pensation, pension, pay, annu rnment in connection with a diff a member of the uniformed state of the include	sability, combat-related injury or services. If you received any retired that pay only to the extent that it ch you would otherwise be entitled if	\$	0.00	\$	
10. Inconnot the Nat dise aga pay dise	ome from all otl include any bene Federal law rela ional Emergenci ease 2019 (COV inst humanity, or annuity, or allor ability, combat-re	ner sources not listed above afits received under the Social ting to the national emergences Act (50 U.S.C. 1601 et sec ID-19); payments received as international or domestic tern wance paid by the United Stat lated injury or disability, or dea	e. Specify the source and amount. Do I Security Act; payments made under y declared by the President under the plant of a war crime, a crime orism; or compensation, pension, les Government in connection with a path of a member of the uniformed arate page and put the total below.	r			
	NAP	ry, list other sources on a sep-	arate page and put the total below.	\$	430.67	\$	
				\$ \$	0.00	\$	
—	atal amounte fron	n separate pages, if any.		+ e	0.00	+	
Part 2		ne total for Column A to the to  Whether the Means Te		MELICOPERORES	2,065.17	Φ	Total current monthly income
12 Cale	culate vour curi	ent monthly income for the	vear. Follow these steps:				
			m line 11	*****************	Cor	oy line 11 here	\$ 2,065.17
		the number of months in a y				Į.	<b>x</b> 12
12b		our annual income for this pa	•			12b.	\$ 24,782.00
	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,				I.	
13, <b>Cal</b>	lculate the medi	an family income that applic	es to you. Follow these steps:				
Fill	in the state in wh	nich you live.	ОНЮ				
Fill	in the number of	people in your household.	1			_	
			size of household.			13,	\$ <u>32,780.0</u> 0
inst	tructions for this	form. This list may also be ava	ts, go online using the link specified i ailable at the bankruptcy clerk's office	n the sepai e.	ale		
14. Ho	w do the lines c	ompare?					
14a		less than or equal to line 13. 3. Do NOT fill out or file Offici	On the top of page 1, check box 1, 7 ial Form 122A-2	There is no p	presumption	of abuse.	
14b		more than line 13. On the top 3 and fill out Form 122A–2.	o of page 1, check box 2, The presum	nption of ab	use is deter	mined by Form 122/	4-2.

Debtor 1	First Name Middle Name Last Name	roung	Case number (if known)
	Ellef Matte Widole Matte		
Part 3	Sign Below		and the second s
	By signing here, I declare under penalty o	f perjury that the informat	ion on this statement and in any attachments is true and correct.
	Signature of Debtor 1/		Signature of Debtor 2
	Date 10/5/202/	1	Date
	If you checked line 14a, do NOT fill ou	t or file Form 122A2.	
1	If you checked line 14b, fill out Form 1	22A-2 and file it with this	form.

NAME OF DESIRES YOUNG
Did you pay someone to help you prepare your bankruptcy petition and schedules?
If so, what is that person's name?
How much did you pay for the help provided?    10/5/202    Please sign your name here   Date
A copy of this completed form will be placed in your bankruptcy file and may be provided to the trustee administering your bankruptcy case and / or the United States Trustee.  YOU SHOULD KEEP A COPY OF THIS FORM FOR YOUR RECORDS.
******
For Internal Use Only:
(1) Was there adequate BPP disclosure on the petition?YESNO
(2) Did debtor(s) pay filing fees in full?YESNONO
If you answer "no" to either question please send this form to the Judge for review.
€ <b>♦</b> ♦ € ↑ ♥